

Bureau of Environmental Health
 7178 Gateway Drive Columbia, MD 21046
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 12/21/12 **ONSITE SEWAGE DISPOSAL SYSTEM** P 544487

INSTALLATION APPROVAL DATE: 10/9/2013 **PERMIT** A _____
CONSTRUCTION

PROPERTY ADDRESS: 1298 Hay Meadow Lane

SUBDIVISION: Hay Meadow LOT: 4 TAX ID: 03-318338

CONTRACTOR: DRJ Construction EMAIL: _____

CONTRACTOR ADDRESS: 5300 Dorsey Hall Drive, Ellicott City, MD 21042 PHONE: 410-977-2216

PROPERTY OWNER: DJR Construction EMAIL: _____

OWNER ADDRESS: Same as above PHONE: _____

SEPTIC TANK SIZE (GALLONS): 1500

PUMP CHAMBER CAPACITY (GALLONS): _____ PUMP SIZE: _____

NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. 3,332 APPLICATION RATE: 0.8

DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>138'</u>	INLET DEPTH: <u>4 4.5</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>8 6.5</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>9</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>4'</u>
LOCATION:	PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.	
NOTES:	Set septic tank per plan. Set distribution box per plan. Install 3 x 46' trenches on contour. Ejector pump required in basement. <u>40', 46' + 52'</u>	

ISSUED BY: Heidi Scott ISSUE DATE: 9-11-13 EXPIRATION DATE: 12/21/13

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADIENT FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT. CALL 410-313-1771 TO SCHEDULE INSPECTIONS.

NOT TO SCALE

See As-Built Drawing On
Separate Sheet

TRENCH/DRAINFIELD DATA

WIDTH INLET BOTTOM

3' 4.5'

NUMBER OF TRENCHES 3

TOTAL LENGTH 142'

ABSORPTION AREA 426 + Sidewall

DISTRIBUTION BOX LEVEL Levelers

DISTRIBUTION BOX BAFFLE Yes

DISTRIBUTION BOX PORT Yes

SEPTIC TANK DATA

SEPTIC TANK I LEVEL Yes

MANUFACTURER Babylon

CAPACITY 1500 GAL

SEAM LOC TOP

TANK LID DEPTH 0.5'-1.5'

BAFFLES Yes

BAFFLE FILTER No

MANHOLE LOC Front

6" PORT LOC Rear

WATERTIGHT TEST No

SLOTTED Yes

DATE ON LID 8/25/2013

~~PUMP/SEPTIC TANK LEVEL N/A~~

~~MANUFACTURER~~

~~CAPACITY GAL~~

~~SEAM LOC~~

~~TANK LID DEPTH~~

~~BAFFLES~~

~~BAFFLE FILTER~~

~~MANHOLE LOC~~

~~6" PORT LOC~~

~~WATERTIGHT TEST~~

~~SLOTTED~~

~~DATE ON LID~~

ROAD NAME

PRE-CONSTRUCTION:

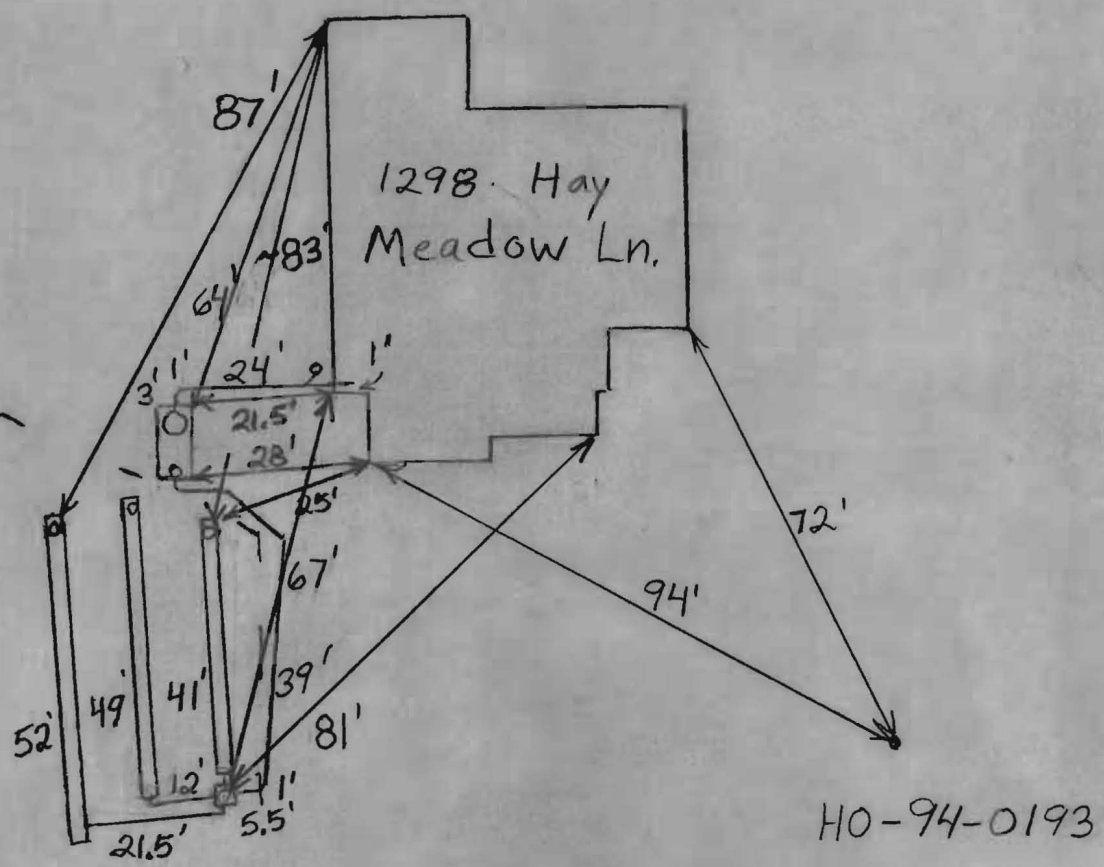
9/17/2013 No one on site. Left note to O.K. tank installation.

10/2/2013 Laid out trenches. (BB)

INSTALLATION: 10/4/2013 Top trench done. Tank set. House connection made. (BB)

10/9/2013 System finished, O.K. to backfill. (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 10/9/2013



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ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

PROPERTY OWNER: DRJ Construction

OWNER'S ADDRESS: 5300 Dorsey Hall Drive, Ellicott City, MD 21042 PHONE: 410-977-2216

ADDRESS: 1298 Hay Meadow Lane TAX ACC'T #: 03-318338

SUBDIVISION: Hay Meadow LOT: 4

SEPTIC TANK CAPACITY (GALLONS): TBD

PUMP CHAMBER CAPACITY (GALLONS): TBD

NUMBER OF BEDROOMS: TBD APPLICATION RATE: TBD

SQUARE FOOTAGE OF HOUSE: TBD

LINEAR FEET OF TRENCH REQUIRED: TBD

TRENCHES:	TO BE DETERMINED ON APPROVED SUPPLEMENTAL PLAN
LOCATION:	TO BE DETERMINED ON APPROVED SUPPLEMENTAL PLAN
NOTES:	A SUPPLEMENTAL PLAN PROVIDING SYSTEM DETAILS IS REQUIRED PRIOR TO HEALTH APPROVAL OF BUILDING PERMIT, PLOT PLAN, AND WALL CHECK. AN APPROVED WALL CHECK IS REQUIRED PRIOR TO PRE-CONSTRUCTION INSPECTION. THE OSDS PERMITTED HEREIN IS NOT SUBJECT TO REVISIONS TO COMAR 26.04.02 EFFECTIVE 1/1/2013 ON THE CONDITION THAT FINAL HEALTH APPROVAL OF THE INSTALLATION IS GRANTED PRIOR TO PERMIT EXPIRATION.

ISSUED BY: JEFF WILLIAMS ISSUE DATE: 12/21/12 EXPIRATION DATE: 12/21/13

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